

● **THE LAW OFFICES OF HYANG K. JANG, P.C.** ●

Hyang K. Jang, Esq.

39-27 Bell Blvd.
Suite#: 206
Bayside, NY 11361
T. (718) 635-3662

USCIS
PO Box 660867
Dallas, TX 75266

April 27, 2020

Re: Form I-102, Application for Replacement/Initial Nonimmigrant Departure Document
Applicant: MEO, Hee Cheong (A#:None)

Dear Sir or Madam

I represent Applicant Hee Cheong Meo in her application for Replacement/Initial Nonimmigrant Departure Document (Form I-102).

The Applicant has lost her passport and Form I-94 attached on it, that she used to enter the United States in 1992. The Applicant is married to U.S. Citizen. Her spouse wants to file the petition for her and she will apply for lawful permanent resident status. She needs her Form I-94 to prove that she had a lawful entry to the United States for the application.

And she could not remember the information which is required for this application, such as 1) Date Status Expires (page 2, part 1, 14), 2) Form I-94 Number (page 2, part 1, 15a), and 3) Expiration Date for the Passport (page 2, part 1, 15e). That is the reason why we put "Unknown" on the blanks.

However, she could verify the passport number (400947) through the certificate of entry and exit issued by the Consulate General of the Republic of Korea in New York. Please see the attachment. We also attached the copy of her most recently issued South Korean passport. The passport number of it is M62166103. And expiration date for the passport is December 15, 2020.

In support of this, please find enclosed the following:

1. A Check in the Amount of \$445.00, representing the Form I-102 Filing Fee;
2. Form G-1145, E-Notification of Application/Petition Acceptance

3. Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, for the Petitioner and Beneficiary;
4. Supporting Documentation;
 - a. Copy of the Applicant's South Korean Passport; And
 - b. Copy of the Applicant's Certificate of Entry and Exit issued by the Consulate General of the Republic of Korea in New York.

Please notify my office should you require any further documentation. Thank you for your prompt attention to this matter.

I hereby certify that all copies of documents enclosed are true copies of the original of which I have personal knowledge.

Very truly yours,

Hyang K. Jang, Esq.

A handwritten signature in black ink, appearing to read 'Jang', with a long, sweeping horizontal line extending to the right.



e-Notification of Application/Petition Acceptance

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form G-1145

What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

General Information

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

USCIS Privacy Act Statement

AUTHORITIES: The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

PURPOSE: The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receipting your immigration form.

ROUTINE USES: The information provided on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [**DHS/USCIS-007 - Benefits Information System and DHS/USCIS-001 - Alien File (A-File) and Central Index System (CIS)**], which can be found at www.dhs.gov/privacy. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Complete this form and clip it on top of the first page of your immigration form(s).

Applicant/Petitioner Full Last Name MEO	Applicant/Petitioner Full First Name HEE CHEONG	Applicant/Petitioner Full Middle Name
Email Address info@phlaws.com		Mobile Phone Number (Text Message) +1 (347) 654-3215



Notice of Entry of Appearance
as Attorney or Accredited Representative

Department of Homeland Security

DHS
Form G-28

OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 4 7 8 9 0 9 4 1 5 6 4

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name) **JANG**
2.b. Given Name (First Name) **HYANG KYOO**
2.c. Middle Name

Address of Attorney or Accredited Representative

3.a. Street Number and Name **3927 Bell Blvd**
3.b. ☐ Apt. ☒ Ste. ☐ Flr. **206**
3.c. City or Town **BAYSIDE**
3.d. State **NY** 3.e. ZIP Code **11361**
3.f. Province
3.g. Postal Code
3.h. Country **USA**

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number **7186353662**
5. Mobile Telephone Number (if any)
6. Email Address (if any) **info@phlaws.com**
7. Fax Number (if any)

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all** applicable items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority

New York State

1.b. Bar Number (if applicable)

5593744

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbaring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable)

LAW OFFICES OF HYANG K JANG PC

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization

2.c. Date of Accreditation (mm/dd/yyyy)

3. ☐ I am associated with

the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

- 1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)
- 1.b. List the form numbers or specific matter in which appearance is entered.
I-102
- 2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)
- 2.b. List the specific matter in which appearance is entered.
- 3.a. ☐ U.S. Customs and Border Protection (CBP)
- 3.b. List the specific matter in which appearance is entered.
4. Receipt Number (if any)
▶
5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):
☒ Applicant ☐ Petitioner ☐ Requestor
☐ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

- 6.a. Family Name (Last Name) MEO
- 6.b. Given Name (First Name) HEE CHEONG
- 6.c. Middle Name
- 7.a. Name of Entity (if applicable)
- 7.b. Title of Authorized Signatory for Entity (if applicable)
8. Client's USCIS Online Account Number (if any)
▶
9. Client's Alien Registration Number (A-Number) (if any)
▶ A-

Client's Contact Information

10. Daytime Telephone Number
3476543215
11. Mobile Telephone Number (if any)
3476543215
12. Email Address (if any)
j3476543215@gmail.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

- 13.a. Street Number and Name 2375 Bell Blvd
- 13.b. ☐ Apt. ☐ Ste. ☒ Flr. 2
- 13.c. City or Town Bayside
- 13.d. State NY 13.e. ZIP Code 11360
- 13.f. Province
- 13.g. Postal Code
- 13.h. Country
USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

- 1.a. ☐ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.
- 1.b. ☐ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

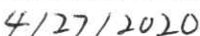
NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

- 1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

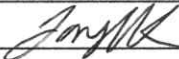
➡ 

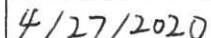
2.b. Date of Signature (mm/dd/yyyy) 

Part 5. Signature of Attorney or Accredited Representative

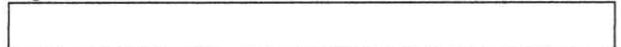
I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.


1. a. Signature of Attorney or Accredited Representative



1.b. Date of Signature (mm/dd/yyyy) 

2.a. Signature of Law Student or Law Graduate



2.b. Date of Signature (mm/dd/yyyy) 

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2.a. Page Number 2.b. Part Number 2.c. Item Number

2.d. _____

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d. _____

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d. _____

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d. _____

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d. _____



Application for Replacement/Initial Nonimmigrant Arrival-Departure Document

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-102

OMB No. 1615-0079

Expires 10/31/2019

For USCIS Use Only	Receipt	Action Block	To Be Completed by an Attorney or Accredited Representative, if any. <input checked="" type="checkbox"/> Select this box if Form G-28 is attached to represent the applicant. Attorney State License Number NY5593744
	New I-94 Number		
	Remarks		

► **START HERE.** Type or print in black ink

Part 1. Information About You

1. Alien Registration Number (A-Number)

► A-

2. USCIS Online Account Number (if any)

►

Your Full Name

3.a. Family Name (Last Name) **MEO**

3.b. Given Name (First Name) **HEE CHEONG**

3.c. Middle Name

U.S. Mailing Address

4.a. In Care Of Name

4.b. Street Number and Name **2375 Bell Blvd**

4.c. Apt. ☐ Ste. ☐ Flr. ☒ **2**

4.d. City or Town **Bayside**

4.e. State **NY** 4.f. ZIP Code **11360**

5. Is your current U.S. mailing address the same as your U.S. physical address? ☒ Yes ☐ No

If you answered "No" to Item Number 5., provide your U.S. physical address in Item Numbers 6.a. - 6.f.

U.S. Physical Address

6.a. In Care Of Name

6.b. Street Number and Name

6.c. Apt. ☐ Ste. ☐ Flr. ☐

6.d. City or Town

6.e. State 6.f. ZIP Code

Other Information

7. Date of Birth (mm/dd/yyyy) ► **06/02/1969**

8. Country of Birth **South Korea**

9. Country of Citizenship **South Korea**

10. U.S. Social Security Number (if any) ► **1 3 1 8 2 4 2 4 9**

Entry Information

11. Date of Last Entry into the United States (mm/dd/yyyy) ► **04/11/1992**

12. Place of Last Entry into the United States (City and State) **New York**

Part 1. Information About You (continued)

13. Current Nonimmigrant Status

Out of Status

14. Date Status Expires

(mm/dd/yyyy) ► Unknown

15.a. Form I-94, I-94W, or I-95 Arrival-Departure Record Number

► Unknown

15.b. Passport Number 4009497

15.c. Travel Document Number

15.d. Country of Issuance for Passport or Travel Document

South Korea

15.e. Expiration Date for Passport or Travel Document

(mm/dd/yyyy) ► Unknown

Part 2. Reason for Application

Select the box that best describes your reason for requesting an initial or replacement document. (Select **only one** box)

- 1.a. ☒ I am applying to replace my lost or stolen Form I-94 or I-94W.
- 1.b. ☐ I am applying to replace my lost or stolen Form I-95.
- 1.c. ☐ I am applying to replace my Form I-94 or I-94W because it was mutilated. I have attached my original Form I-94 or I-94W.
- 1.d. ☐ I am applying to replace my Form I-95 because it was mutilated. I have attached my original Form I-95.
- 1.e. ☐ I was not issued Form I-94 when I was admitted by CBP at a port-of-entry in the United States (*whether at a land border, airport, or seaport*).
- 1.f. ☐ I was issued Form I-94, I-94W, or I-95 with incorrect information, and I am requesting that USCIS correct the document. I have attached my original Form I-94, I-94W, or I-95.
- 1.g. ☐ I was not issued Form I-94 when I entered as a nonimmigrant member of the military, and I am filing this application for an initial Form I-94.

Part 3. Processing Information

- 1.a. Are you filing this application with any other petition or application? ☐ Yes ☒ No

If "Yes" provide the USCIS Form Number and name of the application or petition you are filing in **Item Number 1.b.**

- 1.b. USCIS Form Number and Name

- 2.a. Are you now in removal proceedings? ☐ Yes ☒ No

If "Yes" complete **Item Number 2.b.**

- 2.b. Provide detailed information regarding the proceedings. If you need extra space to complete any item, attach a separate sheet of paper; type or print your name and A-Number (if any) at the top of each sheet of paper; indicate the **Page Number, Part Number, and Item Number** to which your answer refers; and date and sign each sheet.

If you are unable to provide the original of your Form I-94, I-94W, or I-95, provide the following information:

NOTE: Provide your name **exactly** as it appears on Form I-94, I-94W, or I-95.

3.a. Family Name (Last Name) MEO

3.b. Given Name (First Name) HEE CHEONG

3.c. Middle Name

4. Class of Admission at Last Entry into the United States

B2

5. Place of Last Entry into the United States (City and State)

New York

Part 4. Statement, Certification, Signature, and Contact Information of the Applicant

NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.

- 1.a. ☒ I can read and understand English, and have read and understand every question and instruction on this form, as well as my answer to every question.
- 1.b. ☐ The interpreter named below has read to me every question and instruction on this form, as well as my answer to every question, in
a language in which I am fluent. I understand every question and instruction on this form as translated to me by my interpreter, and have provided true and correct responses in the language indicated above.
2. ☒ I have requested the services of and consented to
who is ☒ is not ☐ an attorney or accredited representative, preparing this form for me.

Applicant Certification

I certify, under penalty of perjury, that the foregoing is true and correct. Copies of documents submitted are exact photocopies of unaltered original documents, and I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services (USCIS) at a later date. Furthermore, I authorize the release of any information from my records that USCIS may need to determine my eligibility for the benefit that I seek. I furthermore authorize release of information contained in this form, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration of U.S. immigration laws.

3.a. Applicant's Signature



3.b. Date of Signature (mm/dd/yyyy) ▶

Applicant's Contact Information

4. Applicant's Daytime Telephone Number
5. Applicant's Mobile Telephone Number
6. Applicant's E-mail Address

Part 5. Contact Information, Certification, and Signature of the Interpreter

Interpreter's Full Name

Provide the following information concerning the interpreter:

- 1.a. Interpreter's Family Name (Last Name)
- 1.b. Interpreter's Given Name (First Name)
2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

- 3.a. Street Number and Name
- 3.b. Apt. ☐ Ste. ☐ Flr. ☐
- 3.c. City or Town
- 3.d. State 3.e. ZIP Code
- 3.f. Province
- 3.g. Postal Code
- 3.h. Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number
5. Interpreter's E-mail Address

Part 5. Contact Information, Certification, and Signature of the Interpreter (continued)

Interpreter Certification

I certify that:

I am fluent in English and , which is the same language provided in **Part 4., Item Number 1.b.**;

I have read to this applicant every question and instruction on this form, as well as the answer to every question, in the language provided in **Part 4., Item Number 1.b.**; and

The applicant has informed me that he or she understands every instruction and question on the form, as well as the answer to every question.

6.a. Interpreter's Signature

6.b. Date of Signature (mm/dd/yyyy) ▶

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Application, If Other than the Applicant

Preparer's Full Name

Provide the following information concerning the preparer:

1.a. Preparer's Family Name (Last Name)

JANG

1.b. Preparer's Given Name (First Name)

HYANG KYOO

2. Preparer's Business or Organization Name

LAW OFFICES OF HYANG K JANG PC

Preparer's Mailing Address

3.a. Street Number and Name

3927 Bell Blvd

3.b. Apt. ☐ Ste. ☒ Flr. ☐

206

3.c. City or Town

Bayside

3.d. State

NY

3.e. ZIP Code

11361

3.f. Province

3.g. Postal Code

3.h. Country

USA

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

7186353662

5. Preparer's Fax Number

6. Preparer's E-mail Address

info@phlaws.com

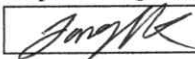
7.a. ☐ I am not an attorney or accredited representative but have prepared this form on behalf of the applicant and with the applicant's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the applicant in this case (choose one) extends ☒ does not extend ☐ beyond the preparation of this form.

Preparer's Declaration

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this form on behalf of, at the request of, and with the express consent of the applicant. I completed the form based only on responses the applicant provided to me. After completing the form, I reviewed it and all of the applicant's responses with the applicant, who agreed with every answer provided for every question on the form and, when required, supplied additional information to respond to a question on the form.

8.a. Preparer's Signature



8.b. Date of Signature (mm/dd/yyyy) ▶

4/27/2020

NOTE: If you need extra space to provide any additional information, attach a separate sheet of paper; type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and date and sign each sheet.

*This passport is valid
for all countries unless
otherwise endorsed.*

Signature of bearer

pleased

모혜정

PMKORMEO<<HEE<CHEONG<<<<<<<<<<<<<<<<<<<<<<<<<<<<
M621661035KOR6906023F20121572905810V13437266

출입국에 관한 사실증명 (CERTIFICATE OF ENTRY & EXIT)

발급번호 (Serial No.) MO-FN-19012438 발급일 (Date of Issue) 2019.06.25 쪽수 (Page Count) 1/1

대상자 (Person upon whom the Certificate is issued)	성명 (Full name)	
	모혜정 (MEO, HE CHEONG)	
	주민등록번호 (Resident Registration No.) / 생년월일 (Date of Birth)	성별 (Sex)
	690602-2905810	여(F)
	국적 (Nationality)	여권번호 (Passport No.)
	한 국(KOREA)	4009497

출입국일자 (Dates of Entry and Exit)	출국 (Exit)	입국 (Entry)	출국 (Exit)	입국 (Entry)
	1992.04.11	'이하 빈칸'		

조회 기간 (Reference Period) 1992.01.01 부터 (from) 2019.06.26 까지 (to)

기록대조자 확인 (Verified by)

「출입국관리법」 제88조제1항에 따라 위의 사실을 증명합니다.
I hereby certify that the above information has been verified pursuant to paragraph 1 of Article 88 of the Immigration Act.

발급일 (Date of Issue)

발급 담당자 (Officer in charge) :

2019년 06월 25일
전화번호 (Phone No.)

주뉴욕대한민국 총영사관

